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☐	L4	saccharomyces.clm. or antisaccharomyces.clm. or antisaccharomyces.clm. or cerevisiae.clm. or asca.clm.	2523
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☐	L7	saccharomyces.clm. and antineutrophil.clm. and $lactoferrin.clm.	0
☐	L8	saccharomyces.clm. and anti-neutrophil.clm. and $lactoferrin.clm.	1
☐	L9	saccharomy$.clm. and $neutrophil.clm. and $lacto-ferrin.clm.	0

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Reproductive Toxicology
Volume 14, Issue 2 , March-April 2000, Pages 103-110

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Original contributions

Lactoferrin is an estrogen responsive protein in the uterus of mice and rats

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Abstract

To identify lactoferrin (LF) and determine its estrogen-responsiveness in the rat uterus, immature Sprague–Dawley rats were untreated or subcutaneously injected with 17β-estradiol (500 μg/kg) for 3 days and uterine tissues collected. Outbred immature CD-1 mice, treated with 17β-estradiol, provided the positive control. By using a polyclonal antibody raised against mouse LF, minimal detectable protein was immunolocalized in uterine epithelial cells of untreated immature rats and mice. After estrogen treatment, LF was localized in all uterine epithelial cells of both species, although staining was more intense in mice than rats. In mice, LF was evenly distributed throughout the cytoplasm with intense staining in some cells, while in rats, it was seen mainly in the apical cytoplasm. For comparison to another well-known estrogen responsive protein in rats, complement C3 was immunolocalized within epithelial cells and it showed a different staining pattern than LF. Uterine tissue homogenates were analyzed by sodium dodecyl sulfate-polyacrylamide gel electrophoresis and Western blots showed cross-reactivity with the mouse LF antibody. These findings indicate that LF is present in the rat uterus, and is induced by estrogens as reported in other species. Thus, LF is an important marker of estrogenic activity across species and will, therefore, have utility in screening for effects of environmental estrogenic compounds.

Author Keywords: Estrogens; Environmental estrogens; Uterotrophic bioassay; Marker proteins; Lactoferrin; Complement C3

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21: Saibeni S, Folli C, de Franchis R, Borsi G, Vecchi M. Related Articles, Links

Diagnostic role and clinical correlates of anti-Saccharomyces cerevisiae antibodies (ASCA) and anti-neutrophil cytoplasmic antibodies (p-ANCA) in Italian patients with inflammatory bowel diseases.
Dig Liver Dis. 2003 Dec;35(12):862-8.
PMID: 14703881 [PubMed - indexed for MEDLINE]

22: Kim JE, Kim KS, Seo JK. Related Articles, Links

[Diagnostic role of anti-Saccharomyces cerevisiae and antineutrophil cytoplasmic autoantibodies in pediatric inflammatory bowel disease]
Korean J Gastroenterol. 2003 Oct;42(4):297-302. Korean.
PMID: 14634349 [PubMed - indexed for MEDLINE]

23: Nakamura RM, Matsutani M, Barry M. Related Articles, Links

Advances in clinical laboratory tests for inflammatory bowel disease.
Clin Chim Acta. 2003 Sep;335(1-2):9-20. Review.
PMID: 12927679 [PubMed - indexed for MEDLINE]

24: Bene L, Fust G, Fekete B, Kovacs A, Horvath L, Prohaszka Z, Miklos K, Palos G, Daha M, Farkas H, Varga L. Related Articles, Links

High normal serum levels of C3 and C1 inhibitor, two acute-phase proteins belonging to the complement system, occur more frequently in patients with Crohn's disease than ulcerative colitis.
Dig Dis Sci. 2003 Jun;48(6):1186-92.
PMID: 12822883 [PubMed - indexed for MEDLINE]

25: Reumaux D, Sendid B, Poulain D, Duthilleul P, Dewit O, Colombel JF. Related Articles, Links

Serological markers in inflammatory bowel diseases.
Best Pract Res Clin Gastroenterol. 2003 Feb;17(1):19-35. Review.
PMID: 12617880 [PubMed - indexed for MEDLINE]

26: Khan K, Schwarzenberg SJ, Sharp H, Greenwood D, Weisdorf-Schindele S. Related Articles, Links

Role of serology and routine laboratory tests in childhood inflammatory bowel disease.
Inflamm Bowel Dis. 2002 Sep;8(5):325-9.
PMID: 12479647 [PubMed - indexed for MEDLINE]

27: Damoiseaux JG, Bouten B, Linders AM, Austen J, Roozendaal C, Russel MG, Forget PP, Tervaert JW. Related Articles, Links

☐ 1: J Clin Gastroenterol. 2003 Oct;37(4):315-29. Related Articles, Links

Autoantibodies in the diagnosis and management of liver disease.

Czaja AJ, Norman GL.

Division of Gastroenterology and Hepatology, Mayo Clinic and Mayo Foundation, Rochester, Minnesota 55905, USA. czaja.albert@mayo.edu

Autoantibodies are nonpathogenic manifestations of immune reactivity, and they may occur in acute and chronic liver diseases. Autoantibodies may be consequences rather than causes of the liver injury, and they should be regarded as diagnostic clues rather than etiologic markers. Conventional autoantibodies used in the categorization of autoimmune liver disease are antinuclear antibodies, smooth muscle antibodies, antibodies to liver/kidney microsome type 1, antimitochondrial antibodies, and atypical perinuclear anti-neutrophil cytoplasmic antibodies. Ancillary autoantibodies that enhance diagnostic specificity, have prognostic connotation, or direct treatment are antibodies to endomysium, tissue transglutaminase, histones, doubled-stranded DNA, and actin. Autoantibodies that have an emerging diagnostic and prognostic significance are antibodies to soluble liver antigen/liver pancreas, asialoglycoprotein receptor, liver cytosol type 1, and nuclear pore complex antigens. Autoantibodies of uncertain clinical value that remain under investigation are antibodies to chromatin, lactoferrin, and Saccharomyces cervisiae. Continued recognition and characterization of autoantibodies should improve diagnostic precision, provide prognostic indices, and elucidate target autoantigens. These advances may in turn clarify pathogenic mechanisms, facilitate the development of animal models, and generate novel site-specific therapies.

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1: Eur J Gastroenterol Hepatol. 1995 Aug;7(8):783-9. Related Articles, Links

Antigen specificity of circulating anti-neutrophil cytoplasmic antibodies in inflammatory bowel disease.

Kossa K, Coulthart A, Ives CT, Pusey CD, Hodgson HJ.

Department of Medicine, Royal Postgraduate Medical School, Hammersmith Hospital, London, UK.

OBJECTIVES: To characterize the antigen specificity of circulating anti-neutrophil cytoplasmic antibodies (ANCAs) in inflammatory bowel disease (IBD). DESIGN: Analysis of the prevalence of circulating ANCAs in patients with ulcerative colitis and Crohn's disease, by both non-specific methods (immunofluorescence against fixed neutrophil leukocytes) and specific antigen techniques (against purified neutrophil leukocyte constituents). METHODS: Indirect immunofluorescence against fixed polymorphonuclear leukocytes, and solid-phase enzyme-linked immunosorbent assay (ELISA) against neutrophil constituents (alpha-granules, elastase, myeloperoxidase, cathepsin g, lysozyme and lactoferrin). RESULTS: Although results using immunofluorescence were typical of other studies (ulcerative colitis positive in 41%, Crohn's disease in 10%), ELISA studies showed antibody activity against neutrophil components in 69% of patients with ulcerative colitis and 39% of those with Crohn's disease. Antibodies in ulcerative colitis were commonly directed (in descending order) against lysozyme, cathepsin G, elastase, and lactoferrin, and in Crohn's disease against lysozyme. CONCLUSION: Correlation of indirect immunofluorescence data and ELISA results indicated that even this large panel of specific antigens fails to identify all the ANCA targets in IBD. The lack of correlation between the findings of ANCAs, either in general or versus a specific target, and disease extent or activity in ulcerative colitis supports the suggestion that ANCAs are unlikely to be of primary importance in pathogenesis.

PMID: 7496870 [PubMed - indexed for MEDLINE]

☐ 1. 20040137536. 24 Oct 03. 15 Jul 04. Inflammatory bowel disease and irritable bowel syndrome IBD-first chek diagnostic panel. Boone, James Hunter, et al. 435/7.2; G01N033/53 G01N033/567.

☐ 2. WO2004037073A2. 24 Oct 03. 06 May 04. INFLAMMATORY BOWEL DISEASE AND IRRITABLE BOWEL SYNDROME IBD-FIRST CHEK DIAGNOSTIC PANEL. BOONE, JAMES HUNTER, et al. A61B00/;.

☐ 3. WO2004037073A. Distinguishing inflammatory bowel disease from irritable bowel syndrome comprises determining whether lactoferrin is present in the fecal sample. BOONE, J H, et al. A61B000/00 G01N033/53 G01N033/564 G01N033/567.

Diagnostic value of anti-Saccharomyces cerevisiae and antineutrophil cytoplasmic antibodies for inflammatory bowel disease: high prevalence in patients with celiac disease.
J Clin Immunol. 2002 Sep;22(5):281-8.
PMID: 12405161 [PubMed - indexed for MEDLINE]

☐ 28: Shafran I, Piromalli C, Decker JW, Sandoval J, Naser SA, El-Zaatari FA. Related Articles, Links

Seroreactivities against Saccharomyces cerevisiae and Mycobacterium avium subsp. paratuberculosis p35 and p36 antigens in Crohn's disease patients.
Dig Dis Sci. 2002 Sep;47(9):2079-81.
PMID: 12353858 [PubMed - indexed for MEDLINE]

☐ 29: Mamula P, Telega GW, Markowitz JE, Brown KA, Russo PA, Piccoli DA, Baldassano RN. Related Articles, Links

Inflammatory bowel disease in children 5 years of age and younger.
Am J Gastroenterol. 2002 Aug;97(8):2005-10.
PMID: 12190168 [PubMed - indexed for MEDLINE]

☐ 30: Halme L, Turunen U, Helio T, Paavola P, Walle T, Miettinen A, Jarvinen H, Kontula K, Farkkila M. Related Articles, Links

Familial and sporadic inflammatory bowel disease: comparison of clinical features and serological markers in a genetically homogeneous population.
Scand J Gastroenterol. 2002 Jun;37(6):692-8.
PMID: 12126248 [PubMed - indexed for MEDLINE]

☐ 31: Lecis P, Germana B, Papa N, Bertiato G, Doglioni C, Galliani E, Biedo FC. Related Articles, Links

[p-ANCA and ASCA antibodies in the differential diagnosis between ulcerative rectocolitis and Crohn's disease]
Recenti Prog Med. 2002 May;93(5):308-13. Italian.
PMID: 12050913 [PubMed - indexed for MEDLINE]

☐ 32: Bartunkova J, Kolarova I, Sediva A, Holzelova E. Related Articles, Links

Antineutrophil cytoplasmic antibodies, anti-Saccharomyces cerevisiae antibodies, and specific IgE to food allergens in children with inflammatory bowel diseases.
Clin Immunol. 2002 Feb;102(2):162-8.
PMID: 11846458 [PubMed - indexed for MEDLINE]

☐ 33: Nakamura RM, Barry M. Related Articles, Links

Serologic markers in inflammatory bowel disease (IBD).
MLO Med Lab Obs. 2001 Nov;33(11):8-15; quiz 16-9.
PMID: 11721286 [PubMed - indexed for MEDLINE]

☐ 34: Malickova K, Janatkova I, Fucikova T, Adamec S, Lukas M. Related Articles, Links

[Initial experience with detection of Saccharomyces cerevisiae antibodies in patients with primary nonspecific inflammatory bowel disease]
Epidemiol Mikrobiol Imunol. 2001 Aug;50(3):131-5. Czech.
PMID: 11550421 [PubMed - indexed for MEDLINE]

☐ 35: Sandborn WJ, Loftus EV Jr, Colombel JF, Fleming KA, Seibold F, Homburger HA, Sendid B, Chapman RW, Tremaine WJ, Kaul DK, Wallace J, Harmsen WS, Zinsmeister AR, Targan SR. Related Articles, Links

Evaluation of serologic disease markers in a population-based cohort of patients with ulcerative colitis and Crohn's disease.
Inflamm Bowel Dis. 2001 Aug;7(3):192-201.
PMID: 11515844 [PubMed - indexed for MEDLINE]

☐ 36: Dubinsky MC, Ofman JJ, Urman M, Targan SR, Seidman EG. Related Articles, Links

Clinical utility of serodiagnostic testing in suspected pediatric inflammatory bowel disease.
Am J Gastroenterol. 2001 Mar;96(3):758-65.
PMID: 11280547 [PubMed - indexed for MEDLINE]

☐ 37: Peeters M, Joossens S, Vermeire S, Vlietinck R, Bossuyt X, Rutgeerts P. Related Articles, Links

Diagnostic value of anti-Saccharomyces cerevisiae and antineutrophil cytoplasmic autoantibodies in inflammatory bowel disease.
Am J Gastroenterol. 2001 Mar;96(3):730-4.
PMID: 11280542 [PubMed - indexed for MEDLINE]

☐ 38: Vermeire S, Peeters M, Vlietinck R, Joossens S, Den Hond E, Bulteel V, Bossuyt X, Geypens B, Rutgeerts P. Related Articles, Links

Anti-Saccharomyces cerevisiae antibodies (ASCA), phenotypes of IBD, and intestinal permeability: a study in IBD families.
Inflamm Bowel Dis. 2001 Feb;7(1):8-15.
PMID: 11233666 [PubMed - indexed for MEDLINE]

☐ 39: Koutroubakis IE, Petinaki E, Mouzas IA, Vlachonikolis IG, Anagnostopoulou E, Castanas E, Maniatis AN, Kouroumalis EA. Related Articles, Links

Anti-Saccharomyces cerevisiae mannan antibodies and antineutrophil cytoplasmic autoantibodies in Greek patients with inflammatory bowel disease.
Am J Gastroenterol. 2001 Feb;96(2):449-54.
PMID: 11232689 [PubMed - indexed for MEDLINE]

☐ 40: Vermeire S, Joossens S, Peeters M, Monsuur F, Marien G, Bossuyt X, Groenen P, Vlietinck R, Rutgeerts P. Related Articles, Links

Comparative study of ASCA (Anti-Saccharomyces cerevisiae antibody) assays in inflammatory bowel disease.
Gastroenterology. 2001 Mar;120(4):827-33.
PMID: 11231936 [PubMed - indexed for MEDLINE]

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1. 6861053. 11 Aug 99; 01 Mar 05. Methods of diagnosing or treating irritable bowel syndrome and other disorders caused by small intestinal bacterial overgrowth. Lin; Henry C., et al. 424/93.1; 424/114 424/116 424/184.1 424/93.4 424/93.45 514/2. A01N063/00 A01N065/00 A01N037/18 A61K035/00 A61K039/00 .

☐ 2. 6805852. 26 Mar 02; 19 Oct 04. Methods of diagnosing irritable bowel syndrome and other disorders caused by small intestinal bacterial overgrowth. Lin; Henry C., et al. 424/1.11; 424/9.1 435/34 435/4 435/7.72. A61K051/00 A61K049/00 C12Q001/00 C12Q001/04 G01N033/497 .

☐ 3. 6562629. 11 Aug 99; 13 May 03. METHOD OF DIAGNOSING IRRITABLE BOWEL SYNDROME AND OTHER DISORDERS CAUSED BY SMALL INTESTINAL BACTERIAL OVERGROWTH BY DETECTING THE PRESENCE OF ANTI-SACCHAROMYCES CERIVISIAE ANTIBODIES (ASCA) IN HUMAN SERUM. Lin; Henry C., et al. 436/506; 435/4 435/7.1. G01N033/564 .

☐ 4. 6218129. 15 May 98; 17 Apr 01. Inflammatory bowel disease first step assay system. Walsh; Michael J., et al. 435/7.21; 435/7.24 435/7.31 435/7.95 436/506 436/513. G01N033/564 .

☐ 5. 5932429. 11 Apr 97; 03 Aug 99. Methods of diagnosing clinical subtypes of crohn's disease. Targan; Stephan R., et al. 435/7.24; 435/7.31 435/7.95 435/975 436/506 436/508. G01N033/564 .